24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
COURAGEOUS CONSERVATIVES PAC	
	C C00587022
Check if 24-hour report X 48-hour report New report X Amends report filed	I on 10 22 2015
Full Name of Payee	Date of Public Distribution/Dissemination
Mountaintop Media	M M / D D / Y Y Y
Mailing Address P O Box 297	10 21 2015 Amount
City State Zip Code	12008.80
Rodanthe NC 27968	Transaction ID : SE.4109 Date of Disbursement or Obligation
Purpose of Expenditure Media Buy Category/ Type	10 21 7 2015
Name of Federal Candidate Support Office	e Sought: House District:00
Tod Cruz	President Senate State: IA
Calendar Year-To-Date Disbu	ursement For: X Primary General
Per Election for Office Sought 12008.80 2016	
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	
Name of Federal Candidate Support Office	e Sought: House District:
Oppose	President Senate State:
	ursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	12008.80
(-,/	7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(a) TOTAL leaders and out France Phone	
(c) TOTAL Independent Expenditures	12008.80
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Lawrence C. The same III.	
	11 03 2015
Signature	